

**ANALYSIS OF SERVICES PROVIDED TO BEHAVIOR DISORDERED
STUDENTS IN A RURAL SOUTHEAST GEORGIA SCHOOL
SYSTEM DURING THE 1980 THROUGH
1985 SCHOOL YEARS**

AN ABSTRACT

**SUBMITTED TO THE FACULTY OF THE SCHOOL OF EDUCATION
ATLANTA UNIVERSITY IN PARTIAL FULFILLMENT OF
THE REQUIREMENTS FOR THE DEGREE OF
EDUCATIONAL SPECIALIST**

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ABSTRACT

Purpose

This study was designed to define, identify, discuss and analyze the placement of behavior disordered students and to determine the delivery models utilized in the special education program in a rural southeast Georgia school system and to compare these models for students served between the 1980 through 1985 school years. It was observed that behavior disordered students received special education services through the itinerant program, categorical resource program, interrelated resource program and related vocational instructional programs during these years.

The Null Hypothesis

Ho There is no difference in the placement of behavior disordered students served in special education programs in a rural southeast Georgia school system.

The null hypothesis was tested to determine that there is no difference in the placement of behavior disordered students in special education programs in a rural southeast Georgia school system.

Method

The descriptive survey method was used in this study. The data was collected from the Georgia Department of Education, Special Education Office, Archives and Records Services. The data were calculated and appropriate statistics were computed. The data were analyzed, interpreted and the F ratio value was compared to the table value of F at the .05 level of degrees of freedom.

Findings

The findings of this study revealed that the categorical resource program and itinerant program served more students than the interrelated resource program and related vocational instructional program. The findings further revealed that the value of F at the .05 level of degrees of freedom rejected the null hypothesis.

Conclusions

The findings of this study gave basis for the following conclusions.

In a rural southeast Georgia school system, during the 1980 through 1985 school years, behavior disordered students received special education services through the delivery models of the itinerant program, categorical resource program, interrelated resource program and related vocational instructional program. These delivery models are listed and discussed in the state's Behavior Disorders: Resource Manuals for Programs for Exceptional Children. Based on this study, it is concluded that further investigation is needed to substantiate the use of the resource models of special education services for behavior disordered students in this rural southeast Georgia school system during the five-year period.

It was observed that the itinerant program served the second highest number of behavior disordered students in this rural school system during the 1980 through 1985 school years. Even though the review of related literature states that this particular model is frequently used in rural areas, it also says that it is under utilized. It is concluded that further investigation of the itinerant program is needed because the special education teacher in rural areas may not be able to provide intensive service on a daily basis if that person serves more than one school and if problems occur frequently.

The categorical resource program delivery model served the highest number of behavior disordered students in the rural southeast Georgia school system during the 1980 through 1985 school years. The review of the related literature indicates that the categorical resource program delivery option is the number one category of special education service in rural areas. The review of the related literature further stated that categorical resource program placement is a convenient answer to rural service problems because a school system may have a variety of low-incidence-handicap students. Further investigation is needed to survey other rural areas to find out if the categorical resource program delivery model continues to be the most widely used special education service throughout the state.

There was only one (1) behavior disordered student to be served in the interrelated resource program delivery model in this particular rural school system during the 1980 through 1985 school years. The review of related literature suggests that there are a small number of teachers trained to provide effective education for behavior disordered students with related handicapping conditions. It is concluded that further investigation is needed to determine why more students are not served in the interrelated resource program delivery model as compared to other models utilized in rural areas.

The review of the related literature indicates that behavior disordered students should receive program instruction in vocational education along with non-handicapped students in existing program components whenever feasible. Even though five (5) behavior disordered students were placed in related vocational instruction programs in this rural southeast Georgia school system during the 1980 through 1985 school years, further investigation is needed to substantiate the feasibility of placing behavior disordered students in related vocational instruction programs in rural areas.

From the analysis and interpretation of the data, it was concluded that behavior disordered students are not equally placed in the special education delivery models of itinerant, resource, interrelated and related vocational instruction programs.

Implications

The implications of this study were drawn as a result of delineating the findings and conclusions of the study.

It was observed that the itinerant program delivery model served the second highest number of behavior disordered students during the school years 1980 through 1985 in a rural southeast Georgia school system. The review of related literature stated that the itinerant program model is under utilized in rural behavior disorders programs and implies that use of this model needs further exploration.

The categorical resource program delivery model served the highest number of behavior disordered students in a rural southeast Georgia school system. It was revealed in the review of related literature that this particular model is the number one category most frequently used to serve behavior disordered students in rural areas. The study implies that rural school districts should explore optimum utilization of this service delivery model.

Behavior disordered students with other handicapping conditions require trained teaching personnel. These students receive special education services through the interrelated resource program delivery model. The review of the related literature states that only a small number of teachers are trained to provide effective education for these students. This study and the review of the literature imply that additional multi-certified personnel are needed to meet the variety of needs of behavior disordered students.

Recommendations

The findings, conclusions and implications gave rise to the recommendations of the study.

The review of the related literature states that the itinerant program model is under utilized in rural areas. It is observed that the itinerant program delivery model served the second largest number of behavior disordered students in a rural school system during the 1980 through 1985 school years. Further research is needed to investigate the possible under utilization of the itinerant program delivery model which serves behavior disordered students in rural areas.

The categorical resource program delivery model is the most widely used special education placement option in rural areas. Even though these students are in the regular classroom program for a portion of the school day, it is recommended that further research be conducted to investigate full-time integration of behavior disordered students in the regular class program.

Behavior disordered students with other handicapping conditions are served in the interrelated resource program delivery model. However, the review of related literature states that there are a small number of teachers trained to provide effective education for these students. It is recommended that further research is needed to investigate the training and hiring of teachers with multi-licenses or certificates to meet these needs.

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DEDICATION

This thesis is dedicated to my wife, Sarah Palmer Baker, and daughter, Chante Mignon Baker. Their support and strength was like a pillar among bitter storms that remained standing.

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I Thank God for allowing me to accomplish this goal that was set many years ago.

I will forever be grateful to the members of my committee, Dr. Collette Hopkins, Chairperson, Dr. Brenda Rogers, and Dr. Rudolph Green. Your guidance enabled me to complete this task.

A special thanks is given to Dr. Collette Hopkins, she is an outstanding person.

I am also grateful to my parents, Mr. John S. Baker and Mrs. Maggie L. Baker. They gave inspiration and encouragement which allowed me to further my education.

Lastly, I express thanks to Mr. Benjamin Holmes, a true friend and a Christian gentleman.

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CHAPTER I

Introduction

Rationale

There are many individuals whose behavior causes great distress to those who must interact with them on a daily basis. Some of these persons are students who have been identified as "behavior disordered" (see definition on page 17). Moreover, they are also required by social expectation and law to attend school in urban as well as in rural areas. "The foundation for the education of behaviorally disordered students comes from Public Law (P.L.) 94-142, the Education for All Handicapped Children Act of 1975."¹ A brief discussion of the origin of this law is essential to provide a frame of reference for this study of the provision for Special Education services.

Early litigation in the field of education is historically documented in the United States Constitution particularly in the Fourteenth Amendment:

All persons born or naturalized in the United States, and subject to the jurisdiction thereof, are citizens of the United States and of the State wherein they reside. No state shall make or enforce any law which shall abridge the privileges or immunities of citizens of the United States; nor shall any state deprive any person of life, liberty, or property, without due process of law; nor deny to any person within its jurisdiction the equal protection of the laws.²

¹Frank H. Wood, "Issues in the Identification and Placement of Behaviorally Disordered Students," Behavior Disorders, Vol. 10, No. 3, May 1985, p. 219.

²U.S. Constitution, Amend. XIV, Sec. 2.

The Fourteenth Amendment dictates several requirements by which the federal and state governments must abide. This amendment also prohibits any state as well as the national government from denying a person an education because of specific unalterable or uncontrollable characteristics, such as race, sex, age, or handicap.

In 1954, the U.S. Supreme Court ruled in Brown v. Board of Education that "racial segregation in the public school violated the Fourteenth Amendment."³ The court's decision was also applied to future cases which involved handicapped children.

Several class action law suits have been influential in changing the status of handicapped children in the United States. These law suits apply not only to the individual who brought the particular case to the courts, but they apply also to all members of the particular class to which that individual belongs. Therefore, the rights of all mentally retarded children and emotionally disturbed children can be reaffirmed by one exceptional child.

The following rulings in some of the recent class action cases are among those which have reaffirmed the rights of the handicapped:

1. In the case of Pennsylvania Association for Retarded Children v. Commonwealth of Pennsylvania in 1972, the court ruled that "a handicapped child cannot be excluded from school without careful due process; it is the responsibility of the schools to provide appropriate programs for children who are different."⁴

³Jose Ballard, Bruce A. Ramirez, and Frederick, J. Weintraub, Special Education in America: Its Legal and Governmental Foundations, (Virginia: The Council for Exceptional Children), p. 13.

⁴Samuel A Kirk and James J. Gallagher, Educating Exceptional Children, (Boston: Houghton Mifflin Company 1983), p. 21.

2. In another case in 1972, Mills v. Board of Education, the court ordered the "District of Columbia to provide all handicapped individuals with a publicly supported education. In addition, the court indicated that before any eligible handicapped child can be excluded from a regular school program alternative educational services designed to meet the child's needs (including special education or tuition grants) had to be provided for these eligible children."⁵ The court also ruled that "the presumed absence of funds is not to be used as an excuse for failure to provide educational services to exceptional children."⁶
3. The class action case of Wyatt v. Stickney in 1972, the court ruled that "handicapped children committed to state institutions must be provided a meaningful education in that setting or their incarceration is to be considered unlawful detention."⁷
4. In the case of Larry P. v. Riles, in 1979, the court ruled that "children should not be labeled handicapped or placed into special education without adequate diagnosis that takes into account different cultural and linguistic background."⁸
5. In the State of Georgia, the court ordered in the case of Georgia State Conference of Branches of NAACP, et al., v. State of Georgia, et al. in 1986, that the "state disseminate to the local school districts supplementary information to clarify the assessment of I.Q. scores for special education programs."⁹ The court did not find any evidence of racial discrimination among handicapped children placed in special education particularly the Educable Mentally Retarded Program.

These cases and Amendments discussed are just a few to be mentioned in regard to handicapped children and their rights to participate in publicly supported educational programs. In 1982, Ballard, Ramirez, and Weintraub

⁵Jose Ballard, Bruce A. Ramirez, and Frederick J. Weintraub, Special Education in America: Its Legal and Governmental Foundations, (Virginia: The Council for Exceptional Children 1983), p. 12.

⁶Samuel A. Kirk and James J. Gallagher, Educating Exceptional Children, p. 21.

⁷Ibid., p. 22.

⁸Ibid.

⁹Georgia State Conference of Branches of NAACP, et al., v. State of Georgia, et al., U.S. (11th Cir. 1986).

suggested that forty-six similar right-to-education cases took place in twenty-eight different states prior to 1975. These cases were instrumental in removing barriers of education exclusions for all handicapped children. Also, due to widespread publicity and political activism on behalf of concerned parents and professionals, these cases have set judicial precedents for the federal enactment of The Educational for All Handicapped Children Act of 1975 (Public Law 94-142)."¹⁰ It is important to note that not only did this federal mandate become a matter of precise national policy, but it is often referred to as "The Bill of Rights for the Handicapped."¹¹ It incorporates many of the concepts and provisions of previous legislation and provides a long-term vehicle for educational programs and techniques for monitoring states and local educational agencies for compliance with the law.

When Congress passed The Education for All Handicapped Children Act of 1975 (Public Law 94-142), the tone was set for vast changes in public school programs to provide full educational services to the handicapped.

It is the purpose of this act to assure that all handicapped children have available to them within the time periods specified-- , a free appropriate public education which emphasizes special education and related services designed to meet their unique needs, to assure that the rights of handicapped children and their parents or guardians are protected, to assist States and localities and to provide for the education of all handicapped children, and to assess and assure the effectiveness of efforts to educate handicapped children."¹²

The federal government has established a set of minimum standards that must be followed by state and local educational agencies regarding the

¹⁰Public Law 94-142, The Education of All Handicapped Children Act of 1975. 94th Congress--First Session, 1975.

¹¹C. Lamar Mayer, Educational Administration and Special Education, (Boston: Allyn and Bacon, Inc.), p. 92.

¹²Ibid.

education of handicapped children. According to P.L. 94-142, handicapped children have secured the following mandates:

"free, appropriate public education, as well as, (a) the right to nondiscriminatory testing, evaluation, and placement procedures; (b) the right to be educated in the least restrictive environment; (c) the right to procedural due process of the law; (d) the right to a free education; and finally (e) the right to an appropriate education."¹³

The right to be educated in the least restrictive environment has taken on legal dimensions through legislation and court decrees respecting handicapped children. The mandate of education in the least restrictive environment has acknowledged the existence of a wide continuum of educational placements, ranging from the least restrictive (regular classroom with non-handicapped children) to the most restrictive (special school or institution). P.L. 94-142 requires that all handicapped children "to the maximum extent appropriate" shall be educated with children who are not handicapped."¹⁴ Furthermore, this act mandates that special classes, separate schooling, or other removal from the regular educational environment should occur "only when the nature or severity of the handicap is such that education in the regular class with the use of supplementary aids and services cannot be achieved satisfactorily."¹⁵

Ballard, Ramirez, and Weintraub speak of three critical provisions in respect to the least restrictive environment in which P.L. 94-142 does mandate. The mandates are as follows:

¹³Jose Ballard, Bruce A. Ramirez, and Frederick J. Weintraub, Special Education in America: Its Legal and Governmental Foundations, p. 15.

¹⁴Ibid.

¹⁵Ibid.

1. Education with non-handicapped children will be the governing objective to the maximum extent appropriate.
2. The IEP will be the management tool toward achievement of the maximum least restrictive environment and therefore shall be applied within the framework of meeting the 'unique needs' of each child.
3. The IEP document(s) must clearly 'show cause' if and when a child is moved from the least restrictive to a more restrictive environment. The statute states that the following component must be included in the written statement accompanying the IEP: ...and the extent to which such child will be able to participate in regular education programs...."¹⁶

Consistent with the federal mandate in regard to the least restrictive environment, Georgia has regulations in keeping with the procedural safeguards guaranteed to exceptional children and their parents.

To the maximum extent appropriate, exceptional children in Georgia shall be educated with children who are not handicapped. Special classes, separate schooling or other removal of handicapped children from the regular class environment shall occur only when the nature of severity of the handicap is such that education in regular classes with the use of supplementary aids and services cannot be satisfactorily achieved. The local system shall have support teams to assure consideration of alternatives. Further, it is the policy of the Georgia Department of Education that handicapped children have the right to be educated with their normal peers, unless clear evidence is available that partial or full removal is desirable for the welfare of the child or other children."¹⁷

The federal and state mandates emphasize that handicapped children must be educated with children who are not handicapped in the least restrictive environment. Consequently, the removal of handicapped children from the regular educational environment may occur only when the handicap is such that education in regular classes cannot satisfactorily meet the educational needs of the individual.

¹⁶Ibid.

¹⁷Georgia Department of Education, Special Education Regulations and Procedures Manual, by Office of Instructional Services, Division of Exceptional Children, (Atlanta, Ga.: Georgia Department of Education), 1983, p. 6.

As outlined, description of the State's least restrictive environment continuum of service in regard to placement should be made available to the parents of children identified as behavior disordered. The continuum of services begins with the most integrated and ends with the most segregated least restrictive environment that is available for the child. They are explained in the State's Behavior Disorders: Resources Manuals for Program for Exceptional Children as follows:

- Stage 1--Special education instructional materials and equipment only;
- Stage 2--Special education instructional materials and equipment plus special education consultative services to regular teachers;
- Stage 3--Itinerant or school based special education tutors;
- Stage 4--Special education resource room and teacher;
- Stage 5--Modified self-contained - receives some academic instruction in regular class;
- Stage 6--Self-contained special class - receives limited instruction in regular class;
- Stage 7--Combination regular school and special school;
- Stage 8--Special school
- Stage 9--Special boarding school or residential facility; and
- Stage 10--Special boarding school or residential facility; and
- Stage 11--Hospital instruction."¹⁸

Providing comprehensive services for the identified behavior disordered student within the realm of these stages does legislatively mandate a continuum of programs in the least restrictive environment.

¹⁸Georgia Department of Education, Behavior Disorders: Resource Manuals for Programs for Exceptional Children, Office of Instructional Services, (Atlanta, Georgia: Georgia Department of Education), 1980, p. 16.

Delivery Models Utilized in Rural Areas

Rural school systems are faced with many difficulties when they attempt to provide special education services for behavior disordered students. Unlike urban areas, special education delivery models are limited in rural areas. The two most widely used service models available for behavior disordered students are the categorical resource program, and consultant itinerant program models. In rural areas, it has been more difficult to implement a continuum of service models in compliance with state rules and regulations as well as the mandates of P.L. 94-142.

Peterson and Zabel state that "resource, consulting, and even itinerant models are most frequently used in rural areas."¹⁹ They also state that "the primary reason for utilizing these models is not that the students are mainly of the mild/moderately variety, thus requiring only indirect or part-time services, but that such models are more 'cost effective'--fewer staff can cover the greatest territory."²⁰

Certainly, many regular classroom teachers and other school personnel who refer students to a behavior disorders Program, are not concerned about the delivery model of service. Their main goal is to place the child in the appropriate environment. The writer feels that when delivery models are limited in rural areas, behavior disordered students do not receive adequate services; therefore, mainstreaming or alternative placement is less likely to occur.

¹⁹Reece L. Peterson and Robert H. Zabel, Current Topics in the Education of Behaviorally Impaired, (Lincoln, Neb.: University of Nebraska--Lincoln), 1982, p. 8.

²⁰Ibid.

Evolution of the Problem

It has been observed that during the school years of 1980 through 1985, the categorical resource program delivery model and the itinerant program delivery models were primarily used for students placed in programs for behavior disordered in a rural school system. From this observation, the writer is of the opinion that these are the only delivery models that exist in this area.

For the past ten years, the writer has been teaching behavior disordered students in rural areas. Throughout these years, he has had the opportunity to discuss the two most widely used delivery models, "itinerant program" and "categorical resource program," with friends and associates from urban areas. They assured him that every delivery model for behavior disordered students is utilized in every possible way in the urban area.

However, this writer is of the opinion that a study to investigate delivery models is necessary to better serve the behavior disordered students in rural areas.

Contribution to Special Education

The writer hopes that the findings of this study will validate information about special education delivery models currently being used to serve behavior disordered students in rural areas. Moreover, this study will make the following contributions to the field of special education:

1. To discuss delivery models other than "categorical resource program" and "itinerant program" that can be used in rural areas with behavioral disordered students.
2. To discuss special education delivery models used for behavior disordered students in a rural southeast Georgia school system during the 1980 through 1985 school years.

The Statement of the Problem

Students who were placed in a rural Southeast Georgia school system behavior disordered program during the 1980 through 1985 school years are

defined specifically by guidelines outlined by the federal and state governments. These students possess characteristics such as, the inability to build or maintain satisfactory interpersonal relationships, and they demonstrated consistent or chronic, inappropriate types of behavior or feelings under normal conditions. Behavior Disordered students exhibit these characteristics and others as defined by state and federal law P.L. 94-142.

Screening, identifying and diagnosing are required evaluative procedures used for placing behavior disordered students in the special education program in a rural school system. Before placement is considered, there are multidisciplinary team meetings, documentation from a variety of sources, and parental input.

Students who participated in the special education behavior disorders program in a rural southeast Georgia school system during the 1980 through 1985 school years were provided the opportunity to function in a least restrictive environment. This type of environment permitted behavior disordered students to attend school and classes with non-handicapped students; consequently, regular class teachers, as well as special education teachers were allowed to work with them.

These students were provided services through the categorical resource program, itinerant program, interrelated resource program and related vocational instructional program delivery models. An indepth study will enhance the writer's knowledge of the various delivery models and the use of these and other models to serve rural behavioral disordered students.

Purpose of the Study

This study will define, discuss, and analyze the placement of behavior disordered students and to determine the delivery models utilized in the special education program in a rural southeast Georgia school system and

compare these models for students served between the 1980 through 1985 school years.

The Hypothesis

Ho There is no difference in the placement of behavior disordered students in special education programs in a rural southeast Georgia school system.

Research Question

The writer will seek to answer to the following question as he investigates the delivery models utilized for serving behavior disordered students in a rural southeast Georgia school system during the 1980 through 1985 school years:

Which delivery model is most often used in a southeast Georgia rural school system for behavior disordered students?

Justification of the Study

The literature suggests that there are a variety delivery models which can be used to provide special education services to behavior disordered students in rural areas. The Georgia Department of Education lists self-contained, multi-system, and residential as alternative models for these students.²¹

Scope of the Study

This researcher proposed to investigate the delivery model of each behavior disordered student who was placed in a program for Behavior Disorders in a southeast Georgia school system during the 1980 through 1985 school years.

²¹Georgia Department of Education, Special Education Regulations and Procedures Manual, by Office of Instructional Services Division of Exceptional Children, Atlanta, Georgia: Georgia Department of Education, 1983, p. 14.

Limitations of the Study

1. The study will not attempt to determine the eligibility of students receiving services in special education in a rural setting.
2. This study will not attempt to investigate other models that a child may have received prior to being placed in Behavior Disordered Program in a rural southeast Georgia school during the 1980 through 1985 school years.
3. This study will not attempt to analyze data relative to behavior disordered students in other counties on school systems during the 1980 through 1985 school years.

The Importance of the Study

This study will be of importance to education because it address special education delivery models that are used for behavior disordered students in a rural southeast Georgia school system. A particular study, which investigated the status of behavior disordered/emotional disturbance service delivery in rural and urban areas of three Midwestern states by Beare and Lynch (1983), states that "traditional service models, particularly involving services for emotional disturbed students are not often applicable or feasible in rural areas and hence may be non-functional for such locales."²² The literature in the study reveals that rural districts that do have services appear to offer fewer options. For example, if rural district categorical has a resource room, it is in all probability "the only service option available where as urban districts might offer a self-contained class placement and a resource room or a alternative school."²³

Beare and Lynch also discuss the teacher that is certified to teach the emotional disturbed or behavior disordered students in rural areas. The

²²Paul L. Beare and Evelyn C. Lynch, "Rural Area Emotional Disturbance Service Delivery: Problems and Future Directions," Behavior Disorders, Vol. 8, No. 2, p. 251.

²³Ibid., p. 252.

study states that if the teacher is multiply licensed, this fact provides a convenient answer to rural service problems because that teacher can serve a variety of low-incidence-handicap students. The statistical data in the study indicates that "in at least 54 percent of rural districts, emotional disturbed students are served in resource rooms by learning disabilities (LD) staff and in 22 percent, by educably mentally handicapped (EMH) licensed staff."²⁴

The writer teaches in a rural southeast Georgia school system. Special education placement options, alternative services models, and trained professionals should be provided and offered for the behavior disordered students in the area.

Procedure for the Study

The procedures for conducting the research proposal were as follows:

1. Secure permission from the local school superintendent and board of education members to conduct this study.
2. Request permission from the Georgia Department of Education, Special Education Offices, Archives and Record Services to obtain descriptions of the models used for students placed in programs for the behavior disordered during the 1980 through 1984 school years in a rural southeast Georgia school system.
3. Review the related literature to acquire knowledge and understanding as to what others have written in to the writer's area of study.
4. Record the related literature that supports the writer's proposal.
5. Analyze the data and report the results.

Definition of Terms

The following terms are defined as they are related to the study:

²⁴Ibid., p. 253-254.

1. Alternative Placements. The State Board of Education of the State of Georgia has established a policy of providing a variety of alternative placement and such a variety shall be available to every child in the State, including regular classes, special classes, special schools, home instruction and instructions including the supplementary services of resource or itinerant instruction.²⁵
2. Behavior Disorders. A behaviorally disordered (BD) student is a student who, after receiving regular educational assistance, counseling, alternative placement and/or the procedures available to all students, still exhibits deviant characteristics of sufficient duration, frequency, and intensity that it interferes significantly with educational performances to the degree that provision of special educational services is necessary. The student's difficulty is emotional/behavioral and cannot be adequately explained by intellectual, cultural, sensory, neurophysiological or general health factors.²⁶
3. Categorical Resource Program. Students with mild to moderate behavior disorders may be enrolled in a regular classroom in designated school but also receive special instruction in a resource program. A resource program is further defined as one in which the students are enrolled in the regular program while receiving special education services for less than one-half of the school day. The types of resource programs shall include but not necessarily be limited to the following.²⁷
(See Appendix A)
4. Consultant Models. A consultant model is a delivery method in which a Behavior Disorders Teacher provide services to behaviorally disordered students without any changes made in the class schedule.²⁸

²⁵Georgia Department of Education, Special Education: Regulations and Procedures, Subpart A, IDDF-Programs for Exceptional Children, August 30, 1984. (Atlanta, Georgia: Georgia Department of Education), pp. 3-6.

²⁶Ibid., p. 18-1.

²⁷Georgia Department of Education, Behavior Disorders: Resources Manual for Program for Exception Children, Vol. III, by Office of Instructional Services, Division of Exceptional Children, Atlanta, Georgia, 1980, p. 18.

²⁸Stanley F. Vasa. Resource Consultant as Service Provider to Behaviorally Impaired Students in the Rural Areas, (Lincoln, Nebraska: ERIC Document Reproduction Services, ED 243 259, 1982), p. 10.

5. Delivery Models. Delivery models are a continuum of delivery systems made available to students identified as behaviorally disordered whether elementary, intermediate, or secondary. These shall include resource, modified self-contained, special schools, multi-system, and residential programs.²⁹
6. Interrelated Resource Program. The term interrelated refers to a combination program in which a teacher works with students who are mildly specifically learning disabled, behaviorally disordered and/or educable mentally retarded. The student should meet the eligibility criteria as outlined in each program area. The recommended enrollment in this program should not exceed 24. The recommended enrollment in this program should not exceed 24. Due process guidelines, including individual assessment, shall be followed. The determination to place any student in a special education shall not be made exclusively or principally upon results of tests administered during evaluation. All pertinent data on each child should be reviewed by the entire placement committee. Cognitive and adaptive behavior criteria shall be considered.³⁰
7. Itinerant Program. An itinerant special education program provides instructional programs to students in more than one school. The itinerant program assist exceptional students and their regular teachers on a rotating schedule. The services may include counseling, tutoring, consultation and resource room classes. The maximum caseload should not exceed 20. The resource teacher should be scheduled a planning hour for observation, evaluation and work coordination with regular classroom teachers.³¹
8. Least Restrictive Environment. This is a concept expressed by the courts in the 1970s saying, that disabled persons should be educated or served in the best possible environment for each individual, and if an individual can function with less structure or restraint, he or she should have that opportunity.³²

²⁹ Georgia Department of Education, Behavior Disorders: Resources Manual for Program for Exceptional Children, Vol. III, by Office of Instructional Services, Division of Exceptional Children, Atlanta, Georgia, 1980, p. 18

³⁰ Ibid.

³¹ Ibid.

³² Leo J. Kelly and Glenn A. Vergason, Dictionary of Special Education and Rehabilitation. Denver: Love Publishing Company, 1987, p. 83.

9. Multi-system Program. The multi-system program is special arrangement made among system to use models particularly applicable to low prevalence exceptionalities such as severely behaviorally disordered. The major admission requirements will be the presence of an emotional disturbance or behavior disorder severe enough to require a special child treatment program or a special education program not available in the public school or the community. Children with secondary handicapping conditions such as mental retardation, learning disability, neurological disability, hearing loss or developmental delay will be accepted if the primary disability is a severe emotional disturbance or behavior disorder. Children who have mild to moderate behavior or discipline problems are not eligible.³³
10. Residential Program. Residential programs are special programs for students with severe handicaps which are operated in residential facilities under the auspices of the local school system in which the facility is located, or under special provisions approved by the State Board of Education. Because of the nature of the residential situation, special consideration may be given to variation from policies for programs in the public school system. A complete program or educating severely handicapped children in residential centers shall involve teachers and specialists.³⁴
11. Resource Room. The resource room is a designated room to which the students come for instruction. The resource room model assumes that the resource teacher and regular education teacher cooperate in planning the student's total instructional program. The hourly caseload should not exceed six students. The maximum caseload should not exceed 24. The resource teacher should be scheduled a planning hour for observation, evaluation, and work and coordination with regular classroom teachers.³⁵
12. Resource Teacher. The resource teacher works with the identified studies or regular teacher within the actual regular classroom setting. The maximum caseload should not exceed 24. The resource teacher should schedule a planning hour for observation, evaluation, and work and coordination with regular classroom teachers.³⁶

³³Georgia Department of Education, Behavior Disorders: Manuals for Programs Exceptional Children, 1980, p. 19.

³⁴Ibid., p. 18.

³⁵Ibid.

³⁶Ibid.

13. Self-Contained Program. The self-contained program is designed for students who require a more structured program over a longer period of time. The students may be enrolled in a self-contained program designed specifically for that exceptionality. A self-contained program for the moderately or severely behaviorally disordered is defined as one in which the students spend one-half or more of the instructional day within the program. The chronological age range of these children shall not exceed the following: (a) Primary - 8; (b) Intermediate - 10; and (c) Secondary - 12.³⁷
14. Related Vocational Instructional (RVI) Program. This a program which provides support services to handicapped secondary students enrolled in a reimbursable vocational education programs.³⁸
15. Rural. A district is considered rural when the number of inhabitants is fewer than 150 per square mile or when located in counties with 600 or more of the population living in communities no larger than 5,000 inhabitants. Districts with more than 10,000 students and those within a Standard Metropolitan Statistical Area (SMSA), as determined by the U.S. Census Bureau, are not considered rural.³⁹

³⁷Ibid., p. 19.

³⁸Ibid., p. 8.

³⁹Doris Helge, "The State of the Art of Rural Special Education," Exceptional Children, Vol. 50, January 1984, p. 295.

CHAPTER II

REVIEW OF THE LITERATURE

Defining the Behavior Disordered Student

The definitional issues appear to be a vital link in describing the emotionally disturbed (ED) or behavior disordered (BD) students in the schools. It is important to know how the federal and state government identify these children. Having an understanding as to how they are defined will aid in designing programs and services in the public schools and in other educational settings.

The Federal definition for the Education for All Handicapped Children Act (Public Law 94-142) is as follows:

(8) "Seriously emotionally disturbed" is defined as follows:

- (i) ... a condition exhibiting one more of the following characteristics over a long period of time and to a marked degree, which affects educational performance:
 - (A) An inability to learn which cannot be explained by intellectual sensory, or health factors;
 - (B) An inability to build or maintain satisfactory interpersonal relationships with peers and teachers;
 - (C) Inappropriate types of behavior or feelings under normal circumstances;
 - (D) A general pervasive mood of unhappiness or depression or;
 - (E) A tendency to develop physical symptoms of fears associated with personal or school problems.
- (ii). The term includes children who are schizophrenic. The term does not include children who are

socially maladjusted, unless it is determined that they are seriously emotionally disturbed.⁴⁰

The regulatory definition serves a "onerous tasks of bringing local programs into compliance with the total of federal regulations and subsequently emerging state regulations."⁴¹

Many states, particularly Georgia, have designed their definitions of the seriously emotionally disturbed in accordance with the federal definition for several reasons. One in particular is for "the purpose of generating federal dollars."⁴² Georgia's definition states a 'Behavior Disorder' is characterized by:

- (A) An inability to build or maintain satisfactory interpersonal relationships with peers and/or teachers;
- (B) An inability to learn which cannot be adequately explained by intellect, sensory, neurophysiologically or general health factors;
- (C) Consistent or chronic inappropriate type of behavior or feelings under normal conditions;
- (D) Displayed pervasive mood of unhappiness or depression; or
- (E) Displayed tendency to develop physical symptoms, pains or reasonable fears associated with personal or school problems.

A behaviorally disordered (BD) student is a student who, after receiving regular educational assistance, counseling, alternative placement and/or other procedures available to all students, still exhibits one or more of the above characteristics of sufficient duration, frequency, and intensity that it interferes significantly with educational performances to the degree that provision of

⁴⁰Roberta Weiner, P.L. 94-142: Impact on the Schools, (Arlington, Virginia: Capitol Publications, Marcy Swerdlin, Publisher, 1985), p. 180.

⁴¹David Greenbury, A Survey of Definition and Identification of Seriously Emotionally Disturbed Youngsters: Local Special Education Administrator Perspective and Processes. A Report of Survey Information, (ERIC Document Reproduction Service, ED 247, 1983), p. 6.

⁴²Ibid., p. 7.

special education services is necessary. The student's difficulty is emotional behavioral and cannot be adequately explained by intellectual, cultural, sensory, neurophysiological or general health.⁴³

In accordance with federal and state definitions, Wood and Lininger study in 1981 state that "education agencies are required to provide programs plans for implementing education services, and local school districts are required to develop plans for programming for all special students and individualized education programs (IEP's) for individual students."⁴⁴ Wood and Lininger offer what we now have, a constitutional based obligation to provide an educational program for all students.

The language pertaining to these definitions shows a consistency in the overall identification process. However, in Greenburg's 1983 study, a survey report which compared the state's definition to the federal government's definition, the analyzed data reveals that Georgia was one of the nine states to use 'behavior' as a basis in its definition for the seriously emotional disturbed students. The data also reveal that Georgia's definition refers to duration and/or degree of the child's difficulties and the adverse effect on education performance of the child in similar language as required by P.L. 94-142.

In a closer look at P.L. 94-142, Kaufman appears to be concerned about its definition for disturbed children. He states that "there is a clause which says that children who are not socially maladjusted, but not emotionally disturbed, are not included, apparently for special education

⁴³Georgia Department of Education, Special Education: Regulations and Procedures, Subpart A, IDDF-Programs for Exceptional Children, August 30, 1983. (Atlanta, Georgia: Georgia Department of Education), pp. 18-19.

⁴⁴Frank H. Wood and Robert Liniger, Services to Seriously Behaviorally Disordered/Emotionally Disturbed Students in Rural Communities, (Minneapolis, MN.: ERIC Document Reproduction Service, ED 239, 785, 1981) p. 90.

services.⁴⁵ These children are probably left to the mercy of the courts and juvenile agencies as well as the local mental health agency. Also, it appears that the federal government wants to exclude certain children in providing them with a free appropriate public education. Greenbury (1983) indicates that Georgia did not include in its definition the socially maladjusted student; however, in the Georgia Department of Education Regulations and Procedures, the State says that a "socially maladjusted child cannot be placed unless it is determined that the child is also behavior disordered."⁴⁶ The writer feels that this does allow for some children to receive special education services even if eligibility assessment instruments are valid for non placement.

The writer wishes to include another definition that he feels is just as essential as Georgia's definition and P.L. 94-142's definition of the emotionally disturbed/behavior disordered student.

Boyle and Jones state:

Behavioral disorders are defined usually by a grouping of symptoms that represent socially undesirable patterns of behavior (e.g., fighting, stealing, lying, and cheating). These patterns of behavior are manifested externally and often reflect deficient interpersonal competence and/or violation of age appropriate social norms. The seriousness of the symptom (e.g., attacking with a knife, arguing, and inattention) are the threshold for specifying a diagnosis of behavior disorders.⁴⁷

⁴⁵James M. Kaufman, "Where Special Education for Disturbed Children is Going: A Personal View," Exceptional Children, Vol. 46, No. 7, p. 524.

⁴⁶Georgia Department of Education, Special Education: Regulations and Procedures, Subpart A, IDDF-Programs for Exceptional Children, 1983, p. 19.

⁴⁷Michael H. Boyle and Sharon C. Jones, "Selecting Measures of Emotional and Behavioral Disorders of Childhood for Use in General Population," Journal of Child Psychology and Psychiatry, Vol. 26, April 1985, p. 137.

Within the realm of this definition, the use of clinical and empirical data is needed to properly identify an individual of such character. The writer believes this is true of the state and federal government's definitions of the emotional disturbed and/or behavior disordered student. All three definitions can be used to identify this population; however, there is one exception. The state and federal government's definitions are the only ones that will be acceptable in a court of law. Moreover, the state must be in compliance with federal guidelines and regulations in order to receive funds and other benefits for its educational programs.

Evaluative Procedures for Behavior Disorders Students

P.L. 94-142 requires that emotionally disturbed children receive a full individual evaluation prior to placement in a special education program.

Evaluation procedures are described in P.L. 94-142 as:

- (a) Test and other evaluation materials:
 - (1) Are provided and administered in the child's native language (defined in the regulations as the language normally used by the child) or other mode of communication, unless it is clearly not feasible to do so;
 - (2) Have been validated for the specific purpose for which they are used; and
 - (3) Are administered by trained personnel in conformance with the instructions provided by their producer;
- (b) Tests and other evaluation materials include those tailored to assess specific areas of educational need and not merely those which are designed to provide a single general intelligence quotient;
- (c) Tests are selected and administered so as best to ensure that when a test is administered to a child with impaired sensory, manual, or speaking skills, the test results accurately reflects the child's aptitude or achievement level or whatever other factors the test purports to measure, rather than reflecting the child's impaired sensory, manual, or speaking skills (except where those skills are the factors which test purports to measure);

- (d) No single procedure is used as the sole criterion for determining an appropriate educational program for a child; and
- (e) The evaluation is made by a multidisciplinary team or group of persons, including at least one teacher or other specialist with knowledge in the area of suspected disability.
- (f) The child is assessed in all areas related to the suspected disability, including, where appropriate, health, vision, hearing, social and emotional status, general intelligence, academic performance, communicative status, and motor abilities.⁴⁷

According to these rules and regulations, assessment data must be from a variety of sources including tests, teacher recommendations, physical condition, cultural or social background, and behavior rating scales as well.

Much like the federal government, Georgia has rules and regulations which local education agencies are to follow. The State says the following about the behavior disordered eligibility and placement:

A student may be considered for placement in a program for the behaviorally disordered based upon a comprehensive case study which shall include:

- (a) Documentation of prior extension of services available in the regular program such as counseling, modifications of the regular program or alternative placement available to all students;
- (b) Psychological and educational evaluations;
- (c) Report of behavioral observations over a period of time; and
- (d) Appropriate social history.

In addition, the placement committee minutes shall contain adequate documentation of the duration, frequency and intensity of one or more of the characteristics of behavior disorders.

The term does not include socially maladjusted students unless it is determined that they are also behavior disordered. A student whose values and/or behavior are in conflict with the school, home or community or who has been adjudicated through the courts or other involvements with correctional agencies,

⁴⁷Rules and regulations for the implementation of Part B of the Education of the Handicapped Act (Public Law 94-142). Federal Register, Aug. 23, 1977. Washington, D.C.: U.S. Government Printing Office, pp. 42496-42497.

is not automatically eligible for (BD) placement. Ordinary classroom behavior problems and social problems, such as delinquency and drug abuse, do not automatically qualify a student for BD placement.⁴⁸

The state's eligibility requirements apply both to rural and urban educational agencies when considering behavior disorder placement.

In the area of behavior disorders, "the route that students take from the regular classroom into special education programs is through the regular classroom teacher, beginning initially through the referral process and finally a placement decision is decided upon."⁴⁹ In a study conducted by Hutton (1985), the three most frequent reasons for referring a child were: "poor peer relationships, displays of frustration, and performance below academic expectation."⁵⁰ His study identified the reasons given by teachers for referring students to special education services. The seventeen reasons listed on the referral are as follows:

Poor peer relationships displays frustration below academic expectations; disruptive; shy; withdrawal; fighting; refusal to work; short attention span; argues, distractible; hyperactive; does not participate; impulsive; immature; daydreams; lacks motivation; and disorganized. Significantly, boys and girls were referred for poor peer relationships; however, boys were least referred because of short attention span, while girls were least referred because of disruption of refusing to work.⁵¹

⁴⁸Georgia Department of Education, Special Education: Regulations and Procedures, Subpart A, IDDF-Programs for Exceptional Children, p. 19.

⁴⁹Jerry B. Hutton, "What Reasons Are Given by Teachers Who Refer Problem Behavior Students?" Psychology in the Schools, Vol. 22, January 1985, p. 79.

⁵⁰Ibid.

⁵¹Ibid.

The data also shows that "poor peer relationships" was the most commonly given reason for placement in the intermediate grades.⁵² High school students were referred most often because of a "display of frustration and poor peer relationships"⁵³ The study concludes that "the majority of reasons for referral were behavioral rather than academic."⁵⁴

Saunders reveals an inexpensive procedure to screen, identify, and diagnose emotionally disturbed children in a rural elementary school. The screening is "based upon the use of a modified form of the Lambert and Bower Behavior Rating of Pupil (BRS)."⁵⁵ The BRS was used to record the incident rate of the emotional disturbances demonstrated by the student. The highest 40 percent of the population ranked on the BRS was further evaluated by the teachers using the Burke Behavior Rating Scale which constituted the identification phase of the program. The Burke Scale contained 116 items that are clustered into 20 factors. These factors are listed as follows:

Excessive self-blame; excessive anxiety; excessive withdrawal; excessive dependency; poor ego strength; poor academics; poor attention; poor impulse control; poor reality contact, poor sense of identify; excessive suffering; poor anger control; excessive sense of precaution; excessive sexuality; excessive aggressiveness; excessive resistance; and poor social conformity.⁵⁶

After scoring the Burke Scale, "any child who attains a score in the significant or very significant range should be considered for further diagnosis

⁵²Ibid.

⁵³Ibid.

⁵⁴Ibid.

⁵⁵Bruce T. Saunders, "A Procedure for the Screening, Identification, and Diagnosis of Emotionally Disturbed Children in the Rural Elementary School," Psychology in the Schools, Vol. 9, No. 2, April 1982, p. 159.

⁵⁶Ibid., p. 163-164.

evaluation."⁵⁷ Saunders also lists some of the more frequently employed diagnostic instruments: (a) Wechsler Intelligence Scale for Children (WISC); (b) Stanford Binet (Form L-M); (c) Illinois Test of Psycholinguistic Ability (ITPA); (d) Peabody Picture Vocabulary Test (PPVT); (e) Children Apperception Test (CAT); (f) Wide Range Achievement Test (WRAT); and (g) Vineland Social Maturity Scale.⁵⁸ The study concludes that even though a person is trained to screen, identify, and diagnose the children in the study, the screening and identifying phases can be conducted by a regular classroom teacher although the diagnosis may have to be performed by a trained personnel such as a psychologist. The writer has administered this assessment and is familiar with some of the identifying, screening and diagnostic instruments used in placing behavior disordered students in the school system in which he is employed. Christenson, Ysseldke, Wang, and Algozzine collected data from regular teachers inquiring why they referred specific students, and their attribution for the student's difficulties. The survey went to fourteen school districts in nine states which consisted of 14 percent rural, 20 percent urban, and 56 percent suburban schools, 105 teachers participated.⁵⁹ The analyzed data in their study indicates that the primary reasons for referral in the areas pertaining to learning was for specific learning deficits which constituted 47.6 percent of 81 participants, 20.4 percent or 19 responses indicated poor social, school adjustment or immature moral development were the primary reasons in the emotionally manifested

⁵⁷Ibid., p. 163.

⁵⁸Ibid., p. 163-164.

⁵⁹Sandra Christenson, James E. Ysseldyke, Jing Jen Wang, and Bob Algozzine, "Teachers' Attributions for Problems that Result in Referrals for Psychoeducational Evaluation," Journal of School Psychology, Vol. 20, Summer 1982, p. 176.

area.⁶⁰ Teachers attributed 53.7 percent of the referrals to some relationship to birth defects or medical related reasons.⁶¹ In the home causes category, the home environment was the highest percentage which constituted for 35.8 percent or 19 responses.⁶²

The study concludes "that boys are continuing to be referred at a much higher rate than girls and that the major reasons for referrals are learning and emotionally related problems."⁶³ The data also reveal that decision for referral is usually based upon a single factor rather than the teacher utilizing numerous variables before making that decision. Teachers should consider environmental factors at home which may cause a child to behavior differently; for example, the parents may be going through divorce proceedings.

Siegel identifies and compares the ratings of school psychologists, regular class teachers, and special education teachers of the emotionally disturbed in regard to conduct and personality behavior problems when referring for psychological services. The analyzed data indicate the top five ranking for each group and a comparison.

The top five rankings for psychologists are as follows:

(1) depression; (2) destructiveness; (3) anxiety, fearfulness; (4) disruptiveness; and (5) hyperactivity. The top five ranking for special education teachers were (1) depression; (2) destructiveness; (3) anxiety, fearfulness, (4) disruptiveness; and (5) temper tantrums.⁶⁴

⁶⁰Ibid.

⁶¹Ibid., p. 177.

⁶²Ibid.

⁶³Ibid., p. 178.

⁶⁴Don J. Siegel, "Children's Behavior Problems and Referral for School Psychological Services," Psychology in the Schools, Vol. 18, 1981, p. 366.

The analyzed data in the study indicate "agreement between professional groups with regard to the relative importance of the various problems in referring a child for school psychological services."⁶⁵ The author suggests in his conclusion "that conduct behavior problems represent infractions that probably provide for the poorest reason for a priority for referral where as personality problems are more accurate."⁶⁶

Placement of Behavior Disordered Students

Federal mandates along with state rules and regulations make it non-optional to place a child into special education without utilizing proper evaluative techniques. The regulations allow for teachers to work with emotionally disturbed or behavior disordered children after they have been properly screened, identified, and diagnosed. Before placement is considered, there must be multidisciplinary team meetings, documentation from a variety of sources, as well as parental input.

P.L. 94-142 requires that emotionally disturbed children receive a public education in the least restrictive environment. The law discusses the general provisions as follows:

- (a) Each state educational agency shall insure that each public agency establishes and implements procedures which meet the requirements of 300a. 550-300a.556.
- (b) Each public agency shall insure:
 - (1) That to the maximum extent appropriate, handicapped children in public and private institutions or other care facilities, are educated with children who are not handicapped, and
 - (2) That special classes, separate schooling or other removal of handicapped children from the regular educational environment occurs only when the nature of

⁶⁵Ibid., p. 368.

⁶⁶Ibid.

severity of the handicap is such that education in regular classes with the use of supplementary aids and services cannot be achieved satisfactorily.⁶⁷

Georgia addresses the least restrictive environment in Appendix A: Parental Rights in Special Education in its Behavior Disorders: Resource Manual for Program for Exceptional Children:

- (1) Right to have your child educated with non-handicapped children to the maximum extent appropriate;
- (2) Right to have your child remain in a regular educational environment, unless a special class or separate school is needed. Removing a child from a regular class environment may only be done when the nature of severity of the handicap is such that education in the regular class with the use of supplementary aids and services cannot be achieved satisfactorily;
- (3) Right to have a continuum of alternative placement so that removal from the regular educational program can be the least restrictive situation;
- (4) Right to have supplementary services such as resource room or itinerant instruction to make it possible for your child to remain in a regular class placement; and
- (5) Right to have placement in the school your child would attend if non-handicapped children in non-academic and extracurricular services and activities such as meals, recess, counseling, clubs, athletics and special interest groups."⁶⁸

The requirements under the federal mandate and Georgia's rules and regulations clearly state that mainstreaming is the ultimate alternative in providing a free and appropriate public education for the emotionally disturbed or behavior disordered student. This means that these children will be

⁶⁷Rules and Regulations for the Implementation of Part B of the Education of the Handicapped Act (Public Law 94-142). Federal Register, August 23, 1977, p. 42297.

⁶⁸Georgia Department of Education, Behavior Disorders: Resource Manuals for Program for Exceptional Children, Vol. III, by Office of Instructional Services, Division of Exceptional Children, (Atlanta, Georgia: Georgia Department of Education, 1980), p. 51.

placed in the regular classroom with the non-handicapped to the maximum extent possible.

Sivage states that the "law necessitates major and far reaching changes in the way that public school personnel work with children."⁶⁹ Sivage circulated a questionnaire to 150 randomly selected elementary schools in Oregon to identify organizational variables that correlated with effective mainstreaming implementation. The results of the study indicate that the highest correlation for effective mainstreaming was the in the variable of 'goal clarity.' The variable assessed how clearly the school's mainstreaming goals are stated and how well teachers understand how their job and work groups will change because of mainstreaming. The second highest correlated variable was in 'staff knowledge.' This variable included how well teachers were able to use behavior modification techniques and prescription teaching for the handicap. Knowing how to work with handicapped children is very important when implementing effective mainstreaming.

The third area of high correlation was the 'agreement of reports'. Communication is essential whether it is what is written on the child's IEP or just effective communication between the principal and teachers.

When comparing effective mainstreaming to school size, Sivage's data reveal that schools with effective programs tend to be larger one. One reason for this is the itinerant program teacher must travel, thus reducing his actual teaching time where as larger school are able to have categorical resource program teachers and several placement options.

⁶⁹Carol Russell Sivage, "Implementing Public Law 94-142: A Case for Organizational Readiness," Journal of Special Educators, Vol. 18, p. 29.

Heilman lists several alternative placement including institutional, alternative schools, self-contained BD classroom, dual special education, and part-time reintegration, for the behavior disordered students. He states that "full-time reintegration is the least restrictive place for BD students prior to total removal from special education."⁷⁰ Whenever a child's placement is full-time reintegration, he is 'self-reporting' to the special education teacher for moral and possibly academic assistance. This is a great step in a child's life; therefore, he must be encouraged to achieve the social and academic goals that are expected of him.

Johnson and Johnson in a recent study discuss the effectiveness of mainstreaming and cooperative learning strategies which can foster positive interaction in the regular classroom. Their study reveals that the teacher is responsible for structuring the classroom and allowing for positive interaction. Strategies which the teacher can use are structuring class activities to reduce competition, making the academic requirements for the handicapped students reasonable, giving group activity assignments, and using different criteria for success for each group member.

As for the behavior disordered students, "cooperative learning, however, should be used whenever teachers want students to learn more, like each other, have higher self-esteem, and learn more effective social skills."⁷¹ These strategies will allow for non-handicapped students to "serve as role

⁷⁰Lanelle Heilman, Establishing a Program for Behaviorally Disordered Students: Alternatives to Consider, Components to include, and Strategies for Building Support, (Des Moines, Iowa: ERIC Document Reproduction Service, Ed 231 112, 1982), p. 12.

⁷¹David W. Johnson and Roger T. Johnson, "Mainstreaming and Cooperative Learning Strategies," Exceptional Children, Vol. 52, June 1986, p. 162.

models, peer tutors, and friends" when behavior disordered students are integrated into the regular classroom.⁷²

Since the passing of P.L. 94-142 along with the Georgia Rules and Regulations, more and more handicapped student are given the opportunity to attend school and classes with non-handicapped students. Regular class teachers must take adjustments in their day to day schedule to meet the needs of the handicap student.

The review of the literature in this section indicates that regular classroom teachers are aware of mainstreaming, and they are also knowledgeable of the law's requirements such as IEP's, evaluation, screening, identifying instruments, and diagnostic inventories. Teachers are also aware of the various strategies and techniques that allow for positive interaction among handicapped and non-handicapped students.

Delivery models utilized in serving behavior disordered students vary. The literature describes the provision of special education for behavior disordered students through a variety of programs. These programs are discussed as delivery models of service for the behavior disordered. Beare and Lynch state that in rural areas, "the number one category or service delivery option was found to be the resource room."⁷³ The writer is a categorical resource program teacher for the behavior disordered students in a rural area and believes that this model is the most considered by the system's special education administrators.

There are advantages of the categorical resource program model which

⁷²Ibid..

⁷³Paul L. Beare and Evelyn C. Lynch, "Rural Area Emotional Disturbance Service Delivery: Problems and Future Directions," Behavior Disorders, Vol. 8, No. 2, February 1983, p. 251.

Vasa lists for the behavioral disordered students in rural areas. They are as follows:

(a) reduces the problems stemming from the low prevalence of students with behavioral disorders, geographic isolation and the financing of support agencies by allowing the special education personnel to serve more students in a larger geographic area that would be possible under the traditional self-contained educational model; (b) provided services in the "least restrictive" environment for mildly behaviorally impaired students in the school they would regularly attend; (c) reduces transportation and coordination costs by bringing the program to the student rather than the students to the program; (d) provides additional resources to the school; (e) provides a staff member trained to work with individual and groups of parents; and (f) retains the integrity of the local districts allowing curriculum and other policy decisions to be made at the local level.⁷⁴

The disadvantages of the categorical resource program delivery model in rural areas should be listed as well. Vasa lists these as:

(a) does not replace more intensive services for more severely behaviorally impaired students, although the resource teacher may serve as a member of the referral/diagnostic team; (b) may not provide the continuity or array of service which some behaviorally impaired students need; (c) is dependent on the acceptance by the school administration and regular classroom teachers who provide services to the behaviorally impaired student; (d) may require more time in travel for the resource consultant from school to school than in providing service to teachers and students; and (e) provided the resource consultant to service as a referral agent; however, the model does not provide medical, psychiatric and other types of related services sometimes desirable.⁷⁵

Gearhart talks about the categorical resource program teacher as being one that has "dual responsibilities."⁷⁶ Not only does the teacher assist the child in finding success in the resource classroom, but he also assists the

⁷⁴Stanley F. Vasa. Resource Consultant as Service Provider to Behaviorally Impaired Students in the Rural Areas, (Lincoln, Nebraska: ERIC Document Reproduction Services, ED 243, 259, 1982), p. 8.

⁷⁵Ibid., p. 9.

⁷⁶Bill R. Gearheart, Special Education for the '80's, (St. Louis, Missouri: The C. V. Mosby Company, 1980), p. 62.

regular classroom teachers with strategies in which to use with part-time reintegrated handicapped students in their classroom.

According to Vasa, "this type of service requires open communication between the regular teacher and the special educator; the regular teacher must feel comfortable in asking for assistance and in trying recommendations offered."⁷⁷

The self-contained is another delivery model used in delivering services to handicapped children. The writer teaches in a school where there is no delivery of service for the self-contained behavior disordered students. In many cases, a behavior disordered child needing this type of service is placed in the categorical resource program class for the maximum amount of resource time, and precise consideration is given to the regular class teacher who will be receiving the student. The teacher is able to work effectively with behavior disordered students even though he or she is not a special education teacher.

Even though the self-contained classroom is the most restrictive environment for handicapped children in the public school, there is a lack of these programs, especially in rural areas. Beare and Lynch reveal that "self-contained classes exist in 24 percent of rural and 63 percent of urban settings when the teacher is emotionally disturbed licensed."⁷⁸

The itinerant program model is another type of delivery service provided to handicapped students. In this delivery model, the student makes contact with the special education teacher whenever there are problems that he or she

⁷⁷Ibid.

⁷⁸Paul L. Beare and Evelyn C. Lynch, "Rural Area Emotional Disturbance Service Delivery: Problems and Future Directions," p. 254.

cannot solve. The student is well on his way to being mainstreamed into the regular school program. The writer has experienced in his even eleven years of working with behavior disordered students signs of joy on the faces of the students when they are itinerant program placed. Students realize that they will be terminated from special education services should this program phase be completed successfully.

Georgia's rules and regulation allow programming for behavior disordered students in other areas of special education under the teacher heading or "interrelated." In the interrelated resource program delivery model, the teacher works with behavior disordered students who meet the eligibility requirements for specifically learning disabled, behavior disordered and/or mentally retarded.

In 1981, a Minneapolis, Minnesota conference report stated that there was a "relationship between categorical labels and appropriate programming for behavioral disordered/emotionally disturbed students."⁷⁹ The report also revealed that some districts reported the enrollment of substantial number of learning students. The issue becomes a matter of labeling which may result from parental pressures in regard to the primary handicap of the child. Parents who recognize their child's need may resist use of the label behavior disordered "because of the potentially lasting stigmatization of the family and the student that results."⁸⁰ The conference report further revealed that "there are a small number of teachers trained to provide effective education for behavior disordered students with related handicapping

⁷⁹Programming for Emotionally Disturbed Students in Rural Public Schools, (Minneapolis, MN: ERIC Document Reproduction Service, ED 239, 785, 1981), p. 95.

⁸⁰Ibid.

conditions."⁸¹ It was further discussed in this report that in some states, a teacher's license must match the student's label, therefore, if an administrator has no teachers trained (licensed) to teach behavior disordered students with other handicapping conditions, it is less likely for that label to be used.

Behavior disordered students participate in vocational education programs in the public school. In Georgia's Behavior Disorders: Resource Manual for Programs for Exceptional Children, the Related Vocational Instruction (RVI) Program is a delivery model which provide services to behavior disordered students. The RVI teacher acts as a liaison to help the behavior disordered student function within the regular vocational education program. Gearheart states that these students should receive "vocational educational programming along with nonhandicapped students in existing vocational program components whenever feasible."⁸²

Although P.L. 94-142 requires that the school system provide service necessary to enable the handicapped child to benefit from special education, the law excludes "the provision of medical services except for evaluative and diagnostic purposes. Thus services deemed as medical treatment are not considered related services."⁸³ Beare and Lynch state, "to expect 'medical model' services for emotional disturbed students in rural areas is impractical."⁸⁴

⁸¹Ibid., p. 95.

⁸²Bill R. Gearheart, Special Education for the 80's, (St. Louis, Missouri: The C. V. Mosby Company, 1980), p. 424.

⁸³Ann P. Turnbull, Bonnie B. Strickland, and John C. Brantley, Developing and Implementing Individualized Education Programs, (Columbus, Ohio: Published by Charles E. Merrill Publishing Co., 1982), p. 177.

⁸⁴Paul L. Beare and Evelyn C. Lynch, "Rural Area Emotional Disturbance Service Delivery: Problems and Future Directions," p. 251.

Historically, it has been typical for rural schools to serve mildly handicapped children in regular classroom settings due to lack of segregated settings. However, programs for moderately and severely handicapped children were not commonly found in rural schools. The traditional pattern has been to place such students in a state or regional facility.⁸⁵

Since there are no residential and state facilities in this particular rural area, moderately and severely handicapped children are served through the multi-system model which transports them to suburban or metropolitan areas that can provide the service.

Of particular interest to this investigation is the provision of special education services in rural schools. The intent to deliver adequate service to rural behavior disordered students "lies in the fact that rural schools generally do not have effective access to the range of governmental programs and services, private organizations, and institutions of higher learning available to their urban counterparts."⁸⁶

Even though P.L. 94-142 applies for special education children in urban as well as in rural areas, there are some distinct uniqueness and diversities about rural schools. One uniqueness is "rural schools contribute greater percentages of their local resources for education."⁸⁷ The diversity is attributed to the fact that "they range geographically from remote islands and deserts to clustered communities, and economically from stable classic farm communities to depressed lower socioeconomic settings and high-growth 'boom or bust' communities."⁸⁸

⁸⁵Doris I. Helge, "Problems in Implementing Comprehensive Special Education Programming in Rural Areas," Exceptional Children, April 1981, p. 519.

⁸⁶Jonathan P. Sher, "A Proposal to End Neglect of Rural School," Phi Delta Kappa, December 1978, p. 281.

⁸⁷Doris Helge, "The State of the Art of Rural Special Education," Exceptional Children, Vol. 50, January 1984, p. 291.

⁸⁸Ibid., p. 298.

Another major problem with implementing P.L. 94-142 in rural areas is recruiting and retaining qualified staff personnel. The writer works in a rural school system where there is a high turnover of special education teachers annually. Similar problems are the need for staff development, long distances between schools and service for the itinerant teachers, cultural differences, geographic barriers, and problems providing services.

In reviewing the literature that have been cited thus far, the writer believes that through P.L. 94-142 and the state's rules and regulations, special education is beginning to receive the attention that other departments of education have gotten throughout previous decades. It is documented legislatively and constitutionally that handicapped students will receive a free and appropriate public education.

As for the behavior disordered students attending school, regular classroom teachers can properly identify and work with them effectively by participating in workshops and in-service training programs. They can obtain information as to how they can better understand, cope, and handle the many problems that these children bring to their classroom. Several studies list strategies that can be used when mainstreaming these students into the school and classroom.

Much attention has been given to rural behavior disordered students. This group is of great interest to the writer because he works with them. It is fascinating to work with such a diverse group of youngsters who probably have never been told that they have potentials and abilities just like other students; assisting them in developing their hidden talents is rewarding.

The service delivery model utilized for rural behavior disordered students is of concern to the writer. For many years in the school in which the writer is employed, these children received only categorical resource

program and itinerant program services. Are there any other delivery models available to these students?

The writer is of the opinion that a thorough study needs to be conducted on the delivery models used for serving behavior disordered students in a rural southeast Georgia school system. An indepth study will enhance the writer's knowledge of the various delivery models and the availability of them in serving rural behavior disordered students.

CHAPTER III

METHODOLOGY AND RESEARCH PROCEDURES

Introduction

This chapter will discuss the methods and research procedures used in his study for placement of students in the behavior disordered classes in a rural southeast Georgia school system. These students were served in programs for the behavior disordered during the 1980 through 1985 school years. This chapter consists of two sections which include an overview of procedures used and the statistical procedures used in treating the data.

Procedures Used

A cover letter attached to a copy of the proposal for the study was submitted to the local school board of education of this rural southeast Georgia school system. The letter requested permission to analyze the delivery models utilized for serving behavior disordered students in this rural southeast Georgia school system during the 1980 through 1985 school years. The request was approved by the school board and initialled by the Special Education Director. (See Appendix B)

The researcher met with the proper official at the Georgia Department of Education Office and the statistical data for the study was secured from the Special Education Office, Department of Archives and Records Services. A copy of the statistical data (Appendix C) which is compiled and submitted monthly for the school system attendance report of students receiving special education services in the various delivery models for behavior disordered students is phase two of the procedure. The report shows the years, delivery

models, school placement level, totals, and percentages of students served during the 1979 through 1985 school years.

Statistical Treatment of Data

The statistical data secured from the Special Education Office, Department of Archives and Records Services was analyzed and interpreted. The computations included totals and means of students for the delivery models of itinerant program, categorical resource program, interrelated resource program, and related vocational instructions. The analysis of variance was used to determine if a significant difference existed between the mean number of students placed in any of the individual delivery models. The F table (Appendix D) was used to interpret the degrees of freedom among and within the models utilized for the behavior disordered students served during the 1980 through 1985 school years.

Subjects in the Study

The subjects (N=366) were elementary, intermediate, and secondary school students identified as behavior disordered during a five-year period (school years of 1980 through 1985) in a rural southeast Georgia school system. The following number of students served: 1980 through 1981, sixty-nine (69); 1981 through 1982, sixty-six (66); 1982 through 1983, fifty-nine (59); 1983 through 1984, eighty-five (85); and 1984 through 1985 eighty-seven (87).

The type of special education delivery model is determined and agreed upon by the IEP placement committee. The 'categorical resource' (R) delivery model provided special education teacher for behavior disordered students. An itinerant program (I) delivery model was utilized when special education programs provided instructions to students in more than one school. The itinerant program services included counseling, tutoring, consultation and resource room classes. Utilizing the 'categorical resource program' and

'itinerant program' delivery models, behavior disordered students were enrolled in the regular classroom program while receiving special education services for less than one-half of the school day.

The 'interrelated resource program (N) delivery model was used when there was a need for a combination program in which a teacher works with students who are learning disabled, behavior disordered and/or mentally handicapped.

Behavior disordered students also received special education services through the Related Vocational Instructional (RVI) Program in a rural southeast Georgia school during the 1980 through 1985 school years. This program provided support services through a RVI teacher, acting as a liaison to help the behavior disordered student function within the regular vocation education program.

The delivery models, years, and levels of behavior disordered student placed in the behavior disordered classes in a rural southeast Georgia school system during the school years of 1980 through 1985 are recorded by the state in the Special Education Monthly Attendance Report (See Appendix C).

Method of Research

The descriptive survey method was used in the study. This method allowed the writer to review records and to obtain validating information as to the type of delivery models that was used for each behavior disordered student served in special education in a rural southeast Georgia school system. The writer analyzed the data about the students served during the 1980 through 1985 school years.

Analysis of Data

Inferential statistics commonly used in the analytical survey method were used in the study. Analysis of variance technique was used to compare

the means for types of placement used during the 1980 through 1985 school years for behavior disordered students in a rural southeast Georgia school system. The "Fisher's Test" was used to compare the groups to determine if a significant difference existed between the mean number of students placed in any of the individual programs.⁸⁹

⁸⁹J. P. Guilford, Fundamental Statistics in Psychology and Education, 2nd ed., (New York: McGraw-Hill Book Company, Inc., 1950), p. 235.

CHAPTER IV
PRESENTATION, ANALYSIS AND INTERPRETATION
OF THE DATA

Introduction

The presentation and analysis of the data revealed the types of delivery models utilized for behavior disordered students in programs of special education, school placement levels, and the number of subjects served each year during the 1980 through 1985 school years in a rural southeast Georgia school system. The Georgia Department of Education, Special Education Office Archives and Record Services provided the data for fulfillment of the purpose of this study.

Only one hypothesis was tested in the study. This hypothesis was used to analyze the placement of behavior disordered students in programs of special education for the behavior disordered. The analysis of variance was obtained for the models utilized. The F ratio score was compared to the table value of F at the .05 degrees of freedom.

The Null Hypothesis

Ho There is no difference in the placement of behavior disordered students served in special education programs in a rural southeast Georgia school system.

The null hypothesis was rejected. Table 1 shows the placement of behavior disordered students in the various special education delivery model programs in a rural southeast Georgia school system during the 1980 through 1985 school years. The table also shows the year, total and mean numbers of behavior disordered students.

It is observed in Table 1, that the total number of behavior disordered

students placed in the itinerant program during the five-year period was 159. This delivery model served the second highest number of behavior disordered students.

There were 201 behavior disordered students placed in the categorical resource program. This delivery model served the highest number of behavior disordered from 1980 through 1985 school years in a rural southeast Georgia school system.

There was only one student placed in the interrelated resource program between the 1980 through 1985 school years in this particular rural southeast Georgia school system. This particular model served the smallest number of behavior disordered students during the five year period.

During the school years of 1980 through 1985, five behavior disordered students were placed in related vocational instruction programs in this rural southeast Georgia school system. It is observed in Table 1 that the related vocational instruction program served the second lowest number of behavior disordered students during the five-year period.

TABLE 1

**STUDENTS PLACED IN BEHAVIOR
DISORDERS PROGRAMS DURING THE 1980
THROUGH 1985 SCHOOL YEARS**

	Itinerant Program	Categorical Resource Program	Interrelated Resource Program	Related Vocational Instruction	
Year	I	R	N	V	TOTAL
1980-81	35	33	0	1	
1981-82	32	34	0	0	
1982-83	28	29	0	2	
1983-84	56	28	0	1	
1984-85	8	77	1	1	
Total	159	201	1	5	366
Mean	31.8	40.2	.2	1	

Therefore, it is concluded that behavior disordered students were placed indifferently in the itinerant program, categorical resource program, interrelated resource program and related vocational instructional special education delivery models in a rural southeast Georgia school system from 1980 through 1985 school years.

Analysis of Variance

Table 2, the completed Anova table shows a calculated F of 11.86. Using a standard F value statistical table, we find the F value with 3 and 16 degrees of freedom at the $\alpha = .05$ level of significance to be 3.24. Since our calculated F of 11.86 is greater than 3.24, we reject our null hypothesis.

Therefore, we conclude that behavior disordered students were not equally placed in Itinerant, Resource, Interrelated and Related Vocational Instructional Programs in this rural southeast Georgia school system during the 1980 through 1985 school years.

TABLE 2

**THE ANALYSIS OF VARIANCE FOR DELIVERY MODELS
UTILIZED IN A RURAL SOUTHEAST
GEORGIA SCHOOL SYSTEM**

SOURCE	DEGREES OF FREEDOM	SUM OF SQUARES	MEAN SQUARES	F RATIO
Among Models	3	6443.8	2147.93	11.86
Within Models	16	2898.4	181.15	
Corrected Totals	19			

Summary

The findings of this study indicates that the categorical resource program delivery model served the greatest number of students placed in special education for the behavior disordered in this particular rural school system. The study further indicates that the least number of students were served in the interrelated resource program model during the same period.

CHAPTER V
SUMMARY OF FINDINGS, CONCLUSIONS, IMPLICATIONS
AND RECOMMENDATIONS

Introduction

The purpose of this study was to define, discuss, and analyze the placement of behavior disordered students and determine the delivery models utilized in the special education program in a rural southeast Georgia school system during the 1980 through 1985 school years. The null hypothesis of no difference was tested to examine the placement of behavior disordered students in the itinerant program, categorical resource program, interrelated resource program and related vocational instruction special education delivery model programs.

A descriptive survey method was utilized in the study. The data was obtained from the Georgia Department of Education, Office of Special Education, Archives and Records Services. The data was calculated, and appropriate statistics were computed. The data was analyzed and interpreted. An analysis of variance was used to determine if there was a significant difference. The F ratio value was compared to the tabled value of F at the .05 level of degrees of freedom which rejected the null hypothesis of equal placement.

Summary of Findings

The findings of this study are presented in Chapter IV in Tables 1. The statistical data reveal that during the five-year period four delivery models were used in this rural southeast Georgia school system. The model used most frequently in the placement of behavior disordered students is the categorical resource program delivery model. Thus, the research question is answered;

moreover, the answer mandates conclusions, implications and recommendations which describe this rural southeast Georgia school system's placement of behavior disordered students.

Conclusions

The findings of this study seem to warrant the following conclusions which were discussed in the review of related literature chapter and in Table 1 in Chapter IV.

It appears that the delivery models of itinerant program, categorical resource program, interrelated resource program and related vocational instructions were utilized for behavior disordered students in a rural southeast Georgia school system during the 1980 through 1985 school years. Heilman's study lists these delivery models as alternative placements for behavior disordered students. These placement programs are "institutional, alternative schools, self-contained behavior disorders classroom, dual special education, and part-time reintegration for the behavior disordered students."⁹⁰ study also reveals that behavior disordered students are placed in the most restrictive to the least restrictive environment. The delivery models utilized in this rural area did not indicate behavior disordered students served in a variety of placement from least to most restrictive; they all received resource special education services. Further investigation is needed to substantiate why only the resource models of special education services for behavior disordered students were used in this rural southeast Georgia school system during the years 1980 through 1985.

⁹⁰Lanelle Heilman, Establishing a Program for Behaviorally Disordered Students: Alternative to Consider, Components to include, and Strategies for Building Support, (Des Moines, Iowa: ERIC Document Reproduction Service, ED 231 112, 1982), p. 7.

The review of related literature previously stated that the itinerant program model is a type of special education placement which provides services for behavior disordered students. Some aspects in particular about the itinerant program model are that the behavior disordered student is mainstreamed into a regular classroom and contact with the special education teacher is made whenever there are problems that he or she cannot solve. In the state's Behavior Disorders: Resource Manuals for Programs for Exceptional Children, behavior disordered students receiving consultant itinerant program special education services are listed under the itinerant program delivery model. Peterson and Zabel reveal that the itinerant model is frequently used in rural areas. Their study further states that "the primary reason for utilizing these models is not that the students are mainly of the mild/moderately variety, thus requiring only indirect or part-time services, but that such models are most 'cost effective'--fewer staff can cover the greatest territory."⁹¹

Table 1 in Chapter IV shows that a total number of 19 behavior disordered students with a mean of 31.8 were placed in the itinerant program delivery model of special education in a rural school system in southeast Georgia during the 1980 through 1985 school years. The table also shows that the itinerant program model served the second highest number of behavior disordered students during the five-year period. Despite this fact, Vasa states that this "model has been under utilized in rural behavior disorders programs."⁹² However, in a study discussed previously by Johnson and Johnson,

⁹¹Reece L. Peterson and Robert H. Zabel, Current Topics in the Education of Behaviorally Impaired, (Lincoln, Nebraska: University of Nebraska--Lincoln, 1982), p. 8.

⁹²Stanley F. Vasa. Resource Consultant as Service Provider to Behaviorally Impaired Students in the Rural Areas, (Lincoln, Nebraska: ERIC Document Reproduction Services, ED 243 259, 1982), p. 19.

behavior disordered students do benefit from the itinerant program placement because non-handicapped students serve as "role models, peer tutors, and friends when they are integrated into the regular classroom."⁹³ Further investigation of the itinerant program delivery model is needed because the special education teacher in rural areas may not be able to provide intensive service on daily basis if that person serves more more than one school and if problems occur frequently.

Table I in Chapter IV shows that 201 behavior disordered students received special education services in the categorical resource program delivery model in a rural southeast Georgia school system during the 1980 through 1985 school years. Previously stated in the review of related literature in a study conducted by Beare and Lynch in 1983, "the number one category of service delivery option was found to be the resource room" in rural areas."⁹⁴ There are advantages of the categorical resource program model which Vasa lists for the behavior disordered students in rural areas. They are as follows:

- (a) reduces the problems stemming from the low prevalence of students with behavior disorders, geographic isolation and the financing of support agencies by allowing the special education personnel to serve more students in a large geographic area that would be possible under traditional self-contained educational model; (b) provided services in the "least restrictive" environment for mildly behaviorally impaired students in the school they would regularly attend; (c) reduces transportation and coordination costs by bringing the program to the student rather than the students to the program; (d) provides additional resources to the school; (e) provides a staff member trained to work with individual and groups of parents; and (f) retains the

⁹³David W. Johnson and Roger T. Johnson, "Mainstreaming and Cooperative Learning Strategies," Exceptional Children, Vol 51, June 1986, p. 162.

⁹⁴Paul L. Beare and Evelyn C. Lynch, "Rural Area Emotional Disturbance Service delivery: Problems and Future Directions," Behavior Disorders, Vol. 8, No. 2, February 1983, p. 251.

integrity of the local districts allowing curriculum and other policy decisions to be made at the local level.⁹⁵

The advantages of the resource delivery model in rural areas should be listed as well. Vasa lists these as:

(a) does not replace more intensive services for more severely behaviorally impaired students, although the resource teacher may serve as a member of the referral/diagnostic team; (b) may not provide the continuity or array of service which some behaviorally impaired students need; (c) is dependent on the acceptance by the school administration and regular classroom teachers who provide services to the behaviorally impaired student; (d) may require more time in travel for the resource consultant from school to school than in providing service to teachers and students; and (e) provided the resource consultant to service as a referral agent; however, the model does not provide medical, psychiatric and other types of related services sometimes desirable.⁹⁶

Vasa and Gearheart previously emphasized that the categorical resource program teacher has a dual responsibility. There must be an open communication network between the special education teacher and the regular classroom teacher.

The review of related literature previously stated that categorical resource program placement is a convenient answer to rural service problems because a school system may have a teacher with multiple licensures; this enables that teacher to serve a variety of low-incidence-handicap students. Further investigation is needed to survey other rural areas to find out if the categorical resource program delivery model is the most widely used special education service throughout the state.

According to Table 1 in Chapter IV, only one behavior disordered student received special education service in the interrelated resource program. The

⁹⁵Stanley F. Vasa. Resource Consultant as Service Provider to Behaviorally Impaired Students in the Rural Areas, (Lincoln, Nebraska: ERIC Document Reproduction Services, ED 243 259, 1982), p. 8.

⁹⁶Ibid.

state's definition of interrelated resource program "refers to a combination program in which a teacher works with students who are mildly specifically learning disabled, behaviorally disordered and/or educable mentally retarded."⁹⁷ An important aspect for such a small number of these students served is attributed to the previous discussion in the review of related literature. A conference report held in Minneapolis, Minnesota, revealed there is a small number of teachers trained to provide effective education for behavior disordered students with related handicapping conditions" in rural public schools.⁹⁸ The study further stated that a teacher's license must match the student's label, therefore, if an administrator has not teachers trained (licensed) to teach behavior disordered students with other handicapping conditions, it is less likely for that label to be used. The writer believes that further investigation is needed to determine why more students are not served in the interrelated resource program delivery model as compared to other models utilized in rural areas.

The review of related literature previously stated that behavior disordered students should receive "vocational education programming along with non-handicapped students in existing vocational program components whenever feasible."⁹⁹ Table 1 in Chapter IV shows a total number of five students placed in Related Vocational Instructional Programs during the 1980 through 1985 school years in a rural southeast Georgia school system. Further

⁹⁷Georgia Department of Education, Behavior Disorders: Manuals for Programs for Exceptional Children, 1980, p. 18.

⁹⁸Programming for Emotionally Disturbed Students in Rural Public Schools, (Minneapolis, MN: ERIC Document Reproduction Services, ED 239 785, 1981), p.

⁹⁹Bill R. Gearheart, Special Education for the 80's, (St. Louis, Missouri: The C. V. Mosby Company, 1980), p. 424.

investigation is needed to substantiate the feasibility of placing behavior disordered students in Related Vocational Instructional Programs in rural areas.

There are other delivery models available for behavior disordered students which are listed in the state's Behavior Disorders: Resource Manual for Program for Exceptional Children but these were not observed in this particular rural southeast Georgia school system during the 1980 through 1985 school years. The statistical data obtained from the Georgia Department of Education, Special Education Office, Archives and Record Services, indicates that only the Itinerant Program, Categorical Resource Program, Interrelated Resource Program, and Related Vocational Instructional Programs delivery models were used. Further study needs to be done to see why other models such as self-contained, medical and residential special education services are not utilized for behavior disordered students in this rural school system.

Implications

The implications of this study were drawn as a result of delineating the summary and conclusion. The review of related literature reveals that delivery models are alternative placements for behavior disordered students. The state's Behavior Disorders: Resource Manuals for Program for Exceptional Children list and define delivery models to be utilized in the behavior disorders programs. Although other delivery models are being utilized which serve behavior disordered students in the most restrictive to the least restrictive environment, this rural southeast Georgia school system utilized the models that provided special education services in the least restrictive environment.

It is revealed in Table 1 in Chapter IV that the itinerant program delivery model served the second highest number of behavior disordered

students during the school years 1980 through 1985. Although the related literature stated that the itinerant program model is under utilized in rural behavior disorders programs.

Table 1 in Chapter IV shows that the categorical resource program model served the highest number of behavior disordered students in a rural south-east Georgia school system. It was also revealed in the review of related literature that this particular model is the number one category most frequently used to serve behavior disordered students in rural areas.

Providing special education services for behavior disordered students with other handicapping conditions require trained teaching personnel. Students of this nature are served in the interrelated resource program model in special education. It was discussed in the review of related literature that only a small number of teachers are trained to provide effective education for these students.

Even though there were only five behavior disordered students served in the Related Vocational Instructional Program during the 1980 through 1985 school years in a rural southeast Georgia school system, this rural school system did provide the special education services for them. The following implications were drawn as a result of the findings and conclusions of the study.

1. Rural school systems should investigate employing multi-certified personnel to serve or help meet the needs of behavior disordered students.
2. Too few delivery models to serve behavior disordered students in rural school systems.

Recommendations

The findings, conclusions and implications give rise to the recommendations of the study.

In the review of the related literature, Peterson and Zabel's study reveals that the itinerant program model is frequently use in serving behavior disordered students in rural areas. Previously stated in Johnson and Johnson's study which revealed that behavior disordered students benefit from itinerant program special education services because they are integrated in the regular classroom with non-handicapped students. However, Vasa states that this "model has been under utilized in rural behavior disorders program."¹⁰⁰ Table 1 in Chapter IV shows that the total number of itinerant program students served were 159 during the 1980 through 1985 school years in a rural southeast Georgia school system. It is observed that the itinerant program delivery models served the second largest number of students during the five-year period. Further research is needed to investigate the under utilization of the itinerant program delivery models to serve behavior disordered students.

Several studies indicated that behavior disordered students in rural areas receive special education services through the categorical resource program delivery model. Beare and Lynch's study reveals that "the number one category of service delivery option was found to be the resource room" in rural areas.¹⁰¹ It is observed in Table 1 in Chapter IV that the largest number of behavior disordered students placed in placed in special education programs were served in the categorical resource program delivery model. Even though these students are in the regular classroom program for a portion of the school day, further research is needed to investigate full-time

¹⁰⁰Stanley F. Vasa. Resource Consultant as Service Provider to Behaviorally Impaired Students in the Rural Areas, (Lincoln, Nebraska: ERIC Document Reproduction Services, ED 243 295, 1982), p. 19.

¹⁰¹Paul L. Beare and Evelyn C. Lynch, "Rural Area Emotional Disturbance Service Delivery: Problems and Future Directions," Behavior Disorders, Vol. 8, No. 2, February 1983, p. 251.

integration of behavior disorders in the least restrictive environment.

The review of related literature reveals that behavior disordered students receiving special education services in the itinerant program delivery model have other handicapping conditions. Therefore, these students should be served by teachers with multi-license or certification. At a conference held in Minneapolis, Minnesota, it was stated that "there is a small number of teachers trained to provide effective education for behavior disordered students with related handicapping conditions" in rural public schools.¹⁰² It is recommended that further research is needed to investigate the hiring of teachers with multi-licenses or certification by rural schools systems.

The writer also concurs with Helge's policy recommendations and feel that they should be offered to national policy makers who influence rural special education service delivery system. These are as follows:

1. The federal government should mandate routine data collection at federal and state levels on the quality of rural special education. Such data collection should include information differentiating rural and nonrural funding and educational quality.
2. The federal government should enhance its commitment to Public Law 94-142 and its implementation in rural America. Adequate funding levels should be initiated and maintained for serving rural students with disabilities.
3. Federal and state governments should provide support for innovative teacher training programs and address critical personnel shortages in rural special education. Federal support should encourage collaborative efforts between state education agencies and universities, designed to devise appropriate personnel preparation programs. Universities should be encouraged to advise students of career opportunities in areas of critical shortages.¹⁰³

¹⁰²Programming for Emotionally Disturbed Students in Rural Public Schools, (Minneapolis, Minnesota: ERIC Document Reproductions Services, ED 239 785, 1981), P. 96.

¹⁰³Doris Helge, "The State of the Art of Rural Special Education," p. 306.

APPENDICES

APPENDIX A

GEORGIA'S CONTINUUM OF SERVICE FOR BEHAVIOR DISORDERED STUDENTS

• *Regular Classroom*

STAGE 1-2

The student is enrolled in a regular classroom and receives his/her instruction from regular education. Consultants, special education teachers, psychologists or other qualified school personnel provide the regular classroom teacher with curriculum suggestions and behavioral management techniques. This plan is feasible for any type of student who can succeed in the regular classroom when modifications are made in the regular classroom.

STAGE 3

The student is enrolled in a regular classroom and receives most of his/her instruction from regular education. In addition, the students may receive tutoring or counseling by a behavior disorders teacher, trained paraprofessional, remedial teacher, school counselor or mental health counselor. The regular classroom teacher will also receive curriculum and behavioral management suggestions through consultation. This plan will provide the child one-to-one contact to enhance his/her ability to achieve in the regular classroom.

This type of plan is feasible for the student who can succeed in the regular classroom when provided a small amount of individual attention and emotional support, as well as modifications within the regular classroom.

• *The Resource Room*

STAGE 4

The student is enrolled in a regular classroom and receives much of his/her instruction from regular education. In addition, the student attends a behavior disorders resource class which provides the student with an opportunity to receive both academic instruction and emotional support. The resource room teacher also provides the regular classroom teacher with curriculum suggestions and behavioral management techniques. This program will allow close association between the special class teacher and all other regular school personnel. This plan is feasible for any type of student who can succeed in the regular classroom when provided a reasonable amount of extra assistance.

Reference

Georgia Department of Education. Behavior Disorders: Resource Manuals for Program for Exceptional Children, Vol. III, Office of Instructional Services, Division of Exceptional Children, 1980, pp. 17-19.

CONTINUE

- *The Self-Contained Class*

STAGE 5

This situation provides a structured classroom setting and adjusted curriculum for those students who are experiencing difficulty in functioning within the regular classroom. In this situation students are enrolled in special classes for at least one-half of the school day, but receive part of their academic instruction in the regular grades. In this way, exceptional students are to varying extents integrated into regular education.

STAGE 6

The self-contained class for the behaviorally disordered student is a situation in which the student spends all of the school day separated from his "normal" peers. The self-contained classroom will provide a more structured classroom environment and adjusted curriculum for those students who are experiencing severe difficulties functioning in a regular classroom. A full-time aide is recommended for this program. It must be understood that students being served in full-time classes should be phased back into the regular school program for activities and academic instruction as they are able to function acceptably.

- *Special School*

STAGE 7-8

A behaviorally disordered student may spend all or part of the school day in a special school away from his/her home school. The special school will provide smaller classes which are more structured and provide an adjusted curriculum for those students who have severe difficulties functioning in the regular school environment. A child may be enrolled in a regular class and/or a special education class within his/her regular school for the remainder of the day or may be enrolled full-time in the special school. The psychoeducational center network is an example of the special school and the type relationships that are possible within the regular school.

- *Homebased, Residential or Hospital Instruction*

STAGE 9-11

Although these services are necessary in certain instances, they should be used only for students who have demonstrated an inability to profit from the previously mentioned programs or for students who are temporarily unable to attend public school programs for the behaviorally disordered.

CONTINUE

Delivery Models

A continuum of delivery systems shall be made available to students identified as behaviorally disordered whether elementary, intermediate or secondary. These shall include resource, modified self-contained, special schools, multisystem and residential programs.

- **Direct Services**

Categorical Resource Program — Students with mild to moderate behavior disorders may be enrolled in a regular classroom in a designated school but also receive special instruction in a resource program. A resource program is further defined as one in which the students are enrolled in the regular program while receiving special education services for less than one-half of the school day. The types of resource programs shall include but not necessarily be limited to, the following.

Resource Room

A designated classroom to which the students come for instruction. The resource room model assumes that the resource teacher and the regular education teacher cooperate in planning the student's total instructional program. The hourly caseload should not exceed six students. The maximum caseload should not exceed 24. The resource teacher should be scheduled a planning hour for observation, evaluation and work and coordination with regular classroom teachers.

Resource Teacher

The resource teacher works with the identified students or regular teacher within the actual regular classroom setting. The maximum caseload should not exceed 24. The resource teacher should be scheduled a planning hour for observation, evaluation, and work and coordination with regular classroom teachers.

Itinerant Program

An itinerant special education program provides instructional programs to students in more than one school. The itinerant program assists exceptional students and their regular teachers on a rotating schedule. The services may include counseling, tutoring, consultation and resource room classes. The maximum caseload should not exceed 20. The resource teacher should be scheduled a planning hour for observation, evaluation, and work and coordination with regular classroom teachers.

Interrelated Resource Program — The term interrelated refers to a combination program in which a teacher works with students who are mildly specifically learning disabled, behaviorally disordered and/or educable mentally retarded. The student should meet the eligibility criteria as outlined in each program area. The recommended enrollment in this program should not exceed 24. Due process guidelines, including individual assessment, shall be followed. The determination to place any student in a special education program shall not be made exclusively or principally upon results of tests administered during evaluation. All pertinent data on each child should be reviewed by the entire placement committee. Cognitive and adaptive behavior criteria shall be considered.

Self-Contained Program — Students who require a more structured program over a longer period of time may be enrolled in a self-contained program designed specifically for that exceptionality. A self-contained program for the moderately or severely behaviorally disordered is defined as one in which the students spend one-half or more of the instructional day within the program. The chronological age range of these children shall not exceed three years. The maximum enrollment should not exceed the following.

CONTINUE

Modified Self-Contained Program — A modified self-contained program for the moderately to severely handicapped is defined as one in which the special education teacher integrates the students into parts of the regular class curriculum. The integration should be based on a reasonable expectation that the student will benefit academically, socially, emotionally and vocationally by such regular class participation. The special education teacher acts as a liaison person to help the handicapped student function comfortably within the regular classroom setting. The maximum enrollment should not exceed the following.

Primary	8
Intermediate	10
Secondary	12

• *Indirect Delivery Models*

Related Vocational Instructional (RVI) Program is defined as one which provides support services to handicapped secondary students enrolled in reimbursable vocational education programs. The recommended caseload for this program is limited to 22 students. The RVI teacher acts as a liaison person to help the handicapped student function within the regular vocational education program.

Multisystem Program

Special arrangements may be developed among systems to use more than one of the previously described models. The multisystem program will be particularly applicable to low prevalence exceptionalities such as severely behaviorally disordered. A student who is severely behaviorally disordered or severely emotionally disturbed may be referred to a Center for Severely Emotionally Disturbed Children if they meet the following criteria.

All centers shall accept children ages 3-16 years. Infants from three months to three years shall be served by the center staff in well-baby clinics, community service centers, in parents' homes or in center classes.

The major admission requirements will be the presence of an emotional disturbance or behavior disorder severe enough to require a special child treatment program or a special education program not available in the public school or the community. Children with secondary handicapping conditions such as mental retardation, learning disability, neurological disability, hearing loss or developmental delay will be accepted if the primary disability is a severe emotional disturbance or behavior disorder. Children who have mild to moderate behavior or discipline problems are not eligible.

Based upon psychological or psychiatric evaluation and appropriate psychoeducational center staffing, one or more of the following characteristics exhibited by the children may be regarded as eligibility for placement.

Severe emotional disturbance such as, but not limited to, childhood schizophrenia, severe emotional deprivation and adjustment reactions

Severe behavioral disorders such as, but not limited to, autism, neurological impairment, cultural deprivation and developmental lag

Severe school-related maladjustment such as, but not limited to, behavior, socialization, communication and academic skills.

The intended population is the severely disturbed student, not solely the defiant, socially maladjusted, adjudicated student. And the definition specifically excludes the aforementioned population unless it is determined that the student is also severely emotionally disturbed.

APPENDIX B

PERMISSION TO OBTAIN STATISTICAL DATA.

Route 1, Box 246 D
Midway, Georgia 31320
November 11, 1985

Liberty County Board of Education
P. O. Box 70
Hinesville, Georgia 31313

Re: Permission to obtain statistical data in the area of Behavior Disorders.

Dear Mr. Edwards and School Board Members,

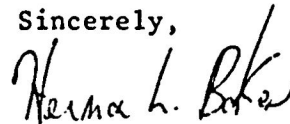
While working at Hinesville Middle School as a Behavior Disorders teacher, I have been persuing the Educational Specialist Degree at Atlanta University.

Presently, I have completed all of my course requirements, but I lack the completion of a thesis. My proposal has been reviewed by the Proposal Committee; however, it cannot be approved until I get permission from the school system to obtain the statistical data.


Attached is a copy of my perspectives. I would appreciate your immediate attention to this matter.

Thank you.

Sincerely,



Herman L. Baker



11-12-85

APPENDIX C

SPECIAL EDUCATION MONTHLY ATTENDANCE REPORT

1980-81

	I	R	N	V	TOTAL
PP	5				5
P	19	3			22
I	11	9			20
S		21		1	22
TOTAL	35	33	0	1	69

1983-84

	I	R	N	V	TOTAL
PP					0
P	24				24
I	32	7			39
S		21		1	22
TOTAL	56	28	0	1	85

1981-82

	I	R	N	V	TOTAL
PP	1				1
P	13	4			17
I	18	8			26
S		22			20
TOTAL	32	34	0	0	66

1984-85

	I	R	N	V	TOTAL
PP		1			1
P	6	13			19
I	2	39	1		42
S		24		1	25
TOTAL	8	77	1	1	87

1982-83

	I	R	N	V	TOTAL
PP					0
P	11	2			13
I	17	9			26
S		18		2	20
TOTAL	28	29	0	2	59

Special Education Delivery Models

I--Itinerant Program

R--Categorical Resource Program

N--Interrelated Resource Program

V--Related Vocational Instruction

PP = Preprimary I = Intermediate
P = Primary S = Secondary

Reference

Georgia Department of Education, Special Education Monthly Attendance Report, (Atlanta, Georgia: Office of Special Education, Archives and Records Services), 1980-1985.

APPENDIX D

DISTRIBUTION of F

5 Percent (Lightface Type) and 1 Percent
(Boldface Type) Points for the Distribution of F

f_2	f_1 Degrees of Freedom (for											
	1	2	3	4	5	6	7	8	9	10	11	12
1	161 4,052	200 4,999	216 5,403	225 5,625	230 5,764	234 5,859	237 5,928	239 5,981	241 6,022	242 6,056	243 6,082	244 6,106
2	18.51 98.49	19.00 99.00	19.16 99.17	19.25 99.25	19.30 99.30	19.33 99.33	19.36 99.34	19.37 99.36	19.38 99.38	19.39 99.40	19.40 99.41	19.41 99.42
3	10.13 34.12	9.55 30.82	9.28 29.46	9.12 28.71	9.01 28.24	8.94 27.91	8.88 29.67	8.84 27.49	8.81 27.34	8.78 27.23	8.76 27.13	8.74 27.05
4	7.71 21.20	6.94 18.00	6.59 16.69	6.39 15.98	6.26 15.52	6.16 15.21	6.09 14.98	6.04 14.80	6.00 14.66	5.96 14.54	5.93 14.45	5.91 14.37
5	6.61 16.26	5.79 13.27	5.41 12.06	5.19 11.39	5.05 10.97	4.95 10.67	4.88 10.45	4.82 10.27	4.78 10.15	4.74 10.05	4.70 9.96	4.68 9.89
6	5.99 13.74	5.14 10.92	4.76 9.78	4.53 9.15	4.39 8.75	4.28 8.47	4.21 8.26	4.15 8.10	4.10 7.98	4.06 7.87	4.03 7.79	4.00 7.72
7	5.59 12.25	4.74 9.55	4.35 8.45	4.12 7.85	3.97 7.46	3.87 7.19	3.79 7.00	3.73 6.84	3.68 6.71	3.63 6.62	3.60 6.54	3.57 6.47
8	5.32 11.26	4.46 8.65	4.07 7.59	3.84 7.01	3.69 6.63	3.58 6.37	3.50 6.19	3.44 6.03	3.39 5.91	3.34 5.82	3.31 5.74	3.28 5.67
9	5.12 10.56	4.26 8.02	3.86 6.99	3.63 6.42	3.48 6.06	3.37 5.80	3.29 5.62	3.23 5.47	3.18 5.35	3.13 5.26	3.10 5.18	3.07 5.11
10	4.96 10.04	4.10 7.56	3.71 6.55	3.48 5.99	3.33 5.64	3.22 5.39	3.14 5.21	3.07 5.06	3.02 4.95	2.97 4.85	2.94 4.78	2.91 4.71
11	4.84 9.65	3.98 7.20	3.59 6.22	3.36 5.67	3.20 5.32	3.09 5.07	3.01 4.88	2.95 4.74	2.90 4.63	2.86 4.54	2.82 4.46	2.79 4.40
12	4.75 9.33	3.88 6.93	3.49 5.95	3.26 5.41	3.11 5.06	3.00 4.82	2.92 4.65	2.85 4.50	2.80 4.39	2.76 4.30	2.72 4.22	2.69 4.16
13	4.67 9.07	3.80 6.70	3.41 5.74	3.18 5.20	3.02 4.86	2.92 4.62	2.84 4.44	2.72 4.30	2.77 4.19	2.63 4.10	2.63 4.02	2.60 3.96
14	4.60 8.86	3.74 6.51	3.34 5.56	3.11 5.03	2.96 4.69	2.85 4.46	2.77 4.28	2.70 4.14	2.65 4.03	2.60 3.94	2.56 3.86	2.53 3.80
15	4.54 8.68	3.68 6.36	3.29 5.42	3.06 4.89	2.90 4.56	2.79 4.32	2.70 4.14	2.64 4.00	2.59 3.89	2.55 3.80	2.51 3.73	2.48 3.67
16	4.49 8.53	3.63 6.23	3.24 5.29	3.01 4.77	2.85 4.44	2.74 4.20	2.66 4.03	2.59 3.89	2.54 3.78	2.49 3.69	2.45 3.61	2.42 3.55
17	4.45 8.40	3.59 6.11	3.20 5.18	2.96 4.67	2.81 4.34	2.70 4.10	2.62 3.93	2.55 3.79	2.50 3.68	2.45 3.59	2.41 3.52	2.38 3.45
18	4.41 8.28	3.55 6.01	3.16 5.09	2.93 4.58	2.77 4.25	2.66 4.01	2.58 3.85	2.51 3.71	2.46 3.60	2.41 3.51	2.37 3.44	2.34 3.37

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